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FEB 11 1958
STATE ENGINEER
SALMON, OREGON

Registration No. GR - 1014
Certificate No. GR - 379

Registration Statement

OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, Mrs. Fujimoto
of Box 252 Baring County of Clatsop
(Mailing address)
State of Oregon, do hereby make application for a certificate of registration as evidence of a right to appropriate ground water.

1. Source from which water is withdrawn is Drilled well #1
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 1 mile east of Baring
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 1270 ft. east of Baring
(Give distance and bearing to corner of section or other legal subdivision)

being within 1/4 Sec. 10 of Sec. 10, Twp. 10, Rge. 10
(Smallest legal subdivision) (N. or S.) (E. or W.)

or (b) within limits of recorded platted property, town or city:

in Lot _____, Block _____ of _____
(Name of plat or addition)

County of _____
(If within city or town, give name)

3. Construction Work was begun on _____; was completed on _____
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on _____
(Date)

since which time the water has been used _____
(Continuously or Intermittently)

from _____ to _____
(Date) (Date)

4. Quantity of water claimed and used is _____ gallons per minute; _____ acre feet per year.

5. Purpose or Purposes for which water is used _____

(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 205 feet. Type _____
(Dug or drilled)

diameter 10 inches. Elevation of ground at well site 6.20 feet, mean sea level.
(As near as known)

Depth to water table 12 feet.

7. Capacity of Well: 50 g.p.m. with 5 feet drawdown.

20 g.p.m. with 75 feet drawdown.

Date of test _____

If Flowing Well: Measured discharge _____ g.p.m. on _____
(Date)

Shut-in pressure at ground surface _____ lbs. per sq. in. on _____
(Date)

Water is controlled by _____
(Cap, valve, etc.)

8. Casing: (Give diameter, commercial specifications and depth below ground surface of each casing size.)

10 inch diameter steel casing from 0 to 250 feet
 inch diameter from to feet
 inch diameter from to feet
 inch diameter from to feet

Describe and show depth of shoe, plug, adapter, liner or other details:

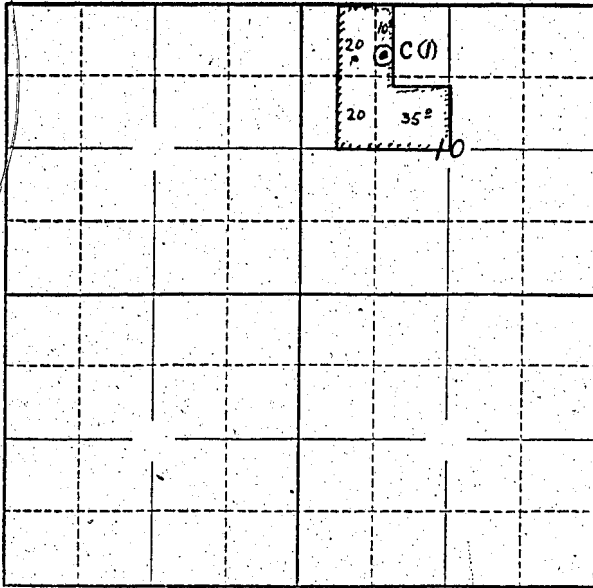
9. Perforated Casings or Screens:

from 127 to
 (Number per foot and size of perforations, or describe screen)
 from to
 from to
 from to

10. Log of Well: (Describe each stratum or formation clearly, indicate if water bearing, and give thickness and depth as indicated.)

MATERIAL	Thickness (Feet)	Depth to Bottom (Feet)
brown clay	20	to 20
brown clay with gravel	20	to 40
cemented gravel	20	to 60
sticky brownish clay	27	to 87
cemented gravel	27	to 114
sand, grayish clay	120	to 171
white clay	171	to 188
blue clay	184	to 193
brown clay	193	to 205
cemented gravel	205	to 237
gravel with little water	237	to 245
cemented gravel	245	to 270
blue clay	270	to 283
gravel with very little water	283	to 297
blue clay	297	to 305

Township 2S Range 3E W.M.
North



Locate well and acreage of irrigated land on plat.
Scale: 2" = 1 Mile

STATE OF OREGON

County of Matthiason } ss.

I, M. [Signature], being first duly sworn, do hereby certify that I have read the foregoing Registration Statement and that all of the items therein contained are true to the best of my knowledge and belief.

[Signature]
(Signature of Registrant)

Subscribed and sworn to before me this 12th day of February, 1958

My commission expires NOTARY PUBLIC FOR OREGON

(Notary Public)

(SEAL)

My Commission Expires Oct. 24, 1953

CERTIFICATE OF REGISTRATION

STATE OF OREGON

County of Marion } ss.

This is to certify that the foregoing Registration Statement was received in the office of the State Engineer on the 14th day of February, 1958, at 8:00 o'clock A. M. and has been duly recorded in said office in Book No. 5 of Registration Statements on page 979.

Witness my hand this 28 day of May, 1958.

[Signature]
(State Engineer)

By _____
(Deputy)